

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	5004294-601
		First Named Inventor	William D. DeFelice
COMPLETE IF KNOWN			
		Application Number	/
		Filing Date	
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention as set forth.

DIGITAL CAMERA/E-MAIL KIOSK

the specification of which

is attached hereto.

25

was filed on (MM/DD/YYYY) by

Application Number [REDACTED] and was amended on (MM/DD/YYYY) [REDACTED] (if applicable).

specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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[Large or 2]
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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are likewise true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U S C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		William D.	Family Name or Surname	DeFelice	
Inventor's Signature				Date 1/25/02	
Guana Bay		St. Maarten, N.A. State	US Country		Citizenship
Residence: City #7 Queen Conch Road					
Mailing Address					
Guana Bay City		St. Maarten State	Zip	Netherlands Antilles Country	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Inventor's Signature		Date			
Residence: City		State	Country	Citizenship	
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<input type="checkbox"/> Additional inventors are being named on the		supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

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PTO/SB/01 (02-01)

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Application Number	
Filing Date	
First Named Inventor	William D. DeFelice
Group Art Unit	
Examiner Name	
Attorney Docket Number	5004294-601

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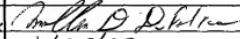
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	William D. DeFelice
Signature	
Date	11/25/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.

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